



### Allied Health • Therapies

#### October 2006 • Bulletin 372

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##### *Medi-Cal Training Seminars*

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#### 2006 CPT-4/HCPSC Codes Reminder

Effective November 1, 2006, Medi-Cal will adopt the 2006 CPT-4 and HCPCS Level II codes. Claims billed for dates of service on or after November 1, 2006 must use the appropriate 2006 codes.

Codes to be added, modified or deleted were listed in the July 2006 *Medi-Cal Update*. Policy for new benefits was announced in the September 2006 *Medi-Cal Update*. Provider manual updates are included in this month's *Medi-Cal Update*.

#### Frequency Limitations Update for Power Wheelchair Replacement Motors and Gear Boxes

Effective retroactively for dates of service on or after November 1, 2005, the allowable daily limitation for the following power wheelchair accessories is two a day. The long-term frequency limitation is two in three years.

<u>HCPCS Code</u>	<u>Description</u>
E2368	Motor, replacement only
E2369	Gear box, replacement only
E2370	Motor and gear box combination, replacement only

No action is required by providers. Claims for these codes submitted on or after the effective date will be automatically reprocessed.

*The updated information is reflected on manual replacement page dura cd fre 3 (Part 2).*

#### Aerosol Mask is New DME Benefit

Effective for dates of service on or after November 1, 2006, HCPCS code A7015 (aerosol mask, used with DME nebulizer) is a new Medi-Cal Durable Medical Equipment (DME) benefit, subject to prior authorization. Code A7015 is limited to disposable masks, must be billed with modifier -NU (purchase), and has a reimbursement rate of \$1.50 per mask. Multiple masks may be reimbursed for the same recipient on the same date of service, but code A7015 is limited to three disposable masks per month, unless additional masks are medically justified and *Treatment Authorization Request* (TAR)-approved.

*The updated information is reflected on manual replacement pages dura cd 6 (Part 2) and dura cd fre 1 (Part 2).*

### CPAP Equipment and Related Accessories Policy Updates

Effective retroactively for dates of service on or after January 1, 2006, in compliance with Medicare policy changes, HCPCS codes A7030 (CPAP full face mask), A7034 (nasal interface), A7035 (headgear) and A7036 (chinstrap) are separately reimbursable on the same date of service with a purchased Continuous Positive Airway Pressure (CPAP) device (code E0601-NU). HCPCS codes A7037 (tubing), A7038 (disposable filter) and A7039 (non-disposable filter) are included in the reimbursement of code E0601-NU, and therefore continue to not be separately reimbursable. Claims for accessory codes A7030 and A7034 – A7036 that were denied for the same date of service as CPAP code E0601-NU, billed for dates of service on or after January 1, 2006, will be automatically reprocessed for potential reimbursement, within the frequency limitations for the individual codes.

Additionally, effective for dates of service on or after November 1, 2006, providers should note the following policy modifications:

- Code A7030 (CPAP full face mask) is not separately reimbursable with other supply codes A7031 (replacement face mask interface), A7032 (replacement nasal mask interface cushion), A7033 (replacement interface pillow), A7034 (nasal interface) or A7036 (chinstrap) if billed for the same month of service, any provider.
- Code A7034 (nasal interface) is not separately reimbursable with other replacement supply codes A7031 (replacement face mask interface), A7032 (replacement nasal mask interface cushion) or A7033 (replacement interface pillow) if billed for the same month of service, any provider.
- The frequency restriction for code A7032 (replacement nasal cushion) is changed to one per month.

*This information is reflected on manual replacement page dura cd fre 1 (Part 2).*

### California Children's Services (CCS) Updates

#### Drugs Requiring Separate Authorization

Injectable drug sermorelin acetate (HCPCS code Q0515) has been added to the table of Drugs Requiring Separate Authorization, effective for dates of service on or after November 1, 2006.

#### Service Code Groupings (SCGs)

Effective for dates of service on or after November 1, 2006, updates will be made to California Children's Services (CCS) Service Code Groupings (SCGs) 01, 02, 03, 04 and 05.

HCPCS code X7038 has been end-dated retroactively for dates of service on or after July 1, 2006.

In addition, CPT-4 codes 78990, 79900, 88182, 88367 – 88368, 91034 – 91035, 91037 – 91038 and 91040 have been added retroactively for dates of service on or after November 1, 2005.

**Reminder:** SCG 02 includes all the codes in SCG 01; SCG 03 includes all the codes in SCG 01 and SCG 02; and SCG 07 includes all the codes in SCG 01. These same “rules” apply to end-dated codes.

*The updated information is reflected on manual replacement pages cal child sar 6 (Part 2) and cal child ser 1 thru 3, 5, 7 thru 17 and 22 (Part 2).*

October 2006

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Remove and replace:

- audio 3/4 \*, 11 \*
- cal child sar 5/6
- cal child ser 1 thru 18, 21/22
- cif co 1/2 \*
- dura cd 3 thru 24
- dura cd fre 1 thru 4
- hcpcs iii 1/2 \*
- medi non hcp 1/2 \*
- modif app 5/6 \*
- ortho cd1 1 thru 31 \*
- ortho cd2 1 thru 22 \*
- respir 5/6 \*

\* Pages updated due to ongoing provider manual revisions.